

# APPLICATION FORM FOR EMPLOYMENT WITH THE U.S. MISSION, CALCUTTA, INDIA

<b>NAME IN FULL</b> (Last)                      (First)                      (Middle)			<b>JOB TITLE IN ANNOUNCEMENT</b>		
<b>SEX</b> Male : Female:			<b>ANNOUNCEMENT NO.</b>		
<b>PRESENT ADDRESS AND TELEPHONE NO.</b>			<b>DATE OF BIRTH</b> (Month, Day, Year)		
			<b>PLACE OF BIRTH</b> (City, Country)		
			<b>CITIZENSHIP</b>		
<b>NAMES AND LOCATION OF EDUCATIONAL INSTITUTIONS ATTENDED</b>		<b>DATES</b> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>From</span> <span>To</span> </div>		<b>DEGREE</b>	<b>MAJOR SUBJECTS</b>
<b>COMPUTER EXPERIENCE:</b>					
<b>SPECIAL QUALIFICATIONS AND SKILLS:</b> List any special skills you possess, i.e. machines, equipment.					
<b>TYPING SKILLS</b>  _____ WPM			<b>LICENSES/CERTIFICATION:</b>		
<b>LANGUAGE PROFICIENCY (Level of competence)</b> <div style="display: flex; justify-content: space-between; font-size: small;"> <span><b>Level I</b> : Rudimentary</span> <span><b>Level III</b> : Good Working Knowledge</span> <span><b>Level V</b> : Interpreter</span> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <span><b>Level II</b> : Limited Knowledge</span> <span><b>Level IV</b> : Fluency</span> </div>					
<b>Language</b>	<b>Speak</b>	<b>Read</b>	<b>Write</b>	<b>Understand</b>	

<b>EMPLOYMENT : Your previous 5 positions of employment.</b> <b>May we approach your present employer?</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Dates of Employment</b>  From:                      To:	<b>Title of Position</b>  <b>Salary (Per Year)</b>	<b>Duties</b>
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of Immediate Supervisor</b>		
<b>Reason for Leaving</b>		
<b>Dates of Employment</b>  From:                      To:	<b>Title of Position</b>  <b>Salary (Per Year)</b>	<b>Duties</b>
<b>Name and Address of Employer</b>		
<b>Name, Title and phone number of Immediate Supervisor</b>		
<b>Reason for Leaving</b>		

<b>Dates of Employment</b> From:            To:		<b>Title of Position</b>	<b>Duties</b>
		<b>Salary (Per Year)</b>	
<b>Name and Address of Employer</b>			
<b>Name, Title and phone number of Immediate Supervisor</b>			
<b>Reason for Leaving</b>			
<b>Dates of Employment</b> From:            To:		<b>Title of Position</b>	<b>Duties</b>
		<b>Salary (Per Year)</b>	
<b>Name and Address of Employer</b>			
<b>Name, Title and phone number of Immediate Supervisor</b>			
<b>Reason for Leaving</b>			
<b>Dates of Employment</b> From:            To:		<b>Title of Position</b>	<b>Duties</b>
		<b>Salary (Per Year)</b>	
<b>Name and Address of Employer</b>			
<b>Name, Title and phone number of Immediate Supervisor</b>			
<b>Reason for Leaving</b>			

<b>REMARKS</b>		
<b>LIST ANY RELATIVES OR FAMILY MEMBERS EMPLOYED BY THE U.S. MISSION</b>		
Name	Section	Relationship
<b>CERTIFICATION</b>		
<b>Before signing this form make sure you have answered all questions fully and completely. A false statement on this form is cause for disqualification/dismissal.</b>		
I do solemnly affirm that the information contained herein is correct to the best of my knowledge and belief.		
_____ SIGNATURE		_____ DATE